File with:

lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319

Iowa Ethics and Campaign			9	<i>(3</i>)
Disclosure Board 510 E. 12 th , Ste. 1A]			ETHIOS AND
Des Moines, Iowa 50319	FOR INSTRUCT	ONS, SEE BACK OF FORM		
Fax: 515-281-4073		E SUMMARY PAGE	e e e e e e e e e e e e e e e e e e e	
COMMITTEE NAME (Must be	e same as on Statement of On		2008 NO	DV -4 AM 11: : 1
A = A + A + A + A + A + A + A + A + A +		•	FO	RM .
HOBBET LO	of committee you are reporting for		1 1	B 2
IMPORTANT: Indicate by # type	of committee you are reporting for	or:	1 1	07/2007) DISCLOSURE
1 (4) County Central Committee (Standing for Retention Candidate 5)County Candidate (6)City Candidate	ndidate (7) School Board or Other Delitic		REFORT
Subdivision Candidate (8)Coun (11) Local Ballot Issue	ty PAC (9) City PAC (10) Scho	ol Board or Other Political Subdivision PA	C FOT U	ffice Use Only
CANDIDATE COMMITTEES	ONLY:			1.#
Condidate Name	^	Political Party (if applicable)		ed In
De Butch Ho	Bank	, (spp,		ned
Office Sought		District (ISO - A A A A A A A A A A A A A A A A A A		uter
County Pur	servisor	District (if Senate or House)	Audite	ed
•			[
candidate's committee, and the	ble civil and criminal penalties. I	Pursuant to Iowa Code sections 68B.32 of committee, is the individual responsit	A(7) and 68A.4	01(3), the candidate, for a
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	or committee, is the individual responsit	e for filing time	ily and accurate reports.
EX. Duna	John A	515-1167-1778		10.30.00
SIGNATURE OF PERSON FIL	ING REPORT	515-462-1778 TELEPHONE	· · ·	0 - 30 - 08 DATE SIGNED
				DATE GIGINED
I AM FILING A _ Siw mg	vera (REPORT FOR (1) ELECTION	//2\NON-Fi F	CTION YEAR
(re	port date)	Indicate by		STICK I LAIV.
□CHECK IF AMENDMENT TO	, DEDODT DATED	•		
Morrest Williams	TREPORT DATED		Local Committee	es, enter Date of Election
☐ Check if this is final (termina	ation) report and attach Notice	of Dissolution Form DD 2	/1-	4-08
(You must continue to	file reports until a DR-3 is file	ed.)	County & Local	Committees, enter County in
•			which Election i	s held
			MAG	1700
STATEM	ENT OF CASH ON HAN	D		
CASH ON HAND at the beginning	ing of the reporting period. (T	otal of all funds held by the		
committee. This amou	unt MUST be the same as the	cash on hand at the end		a 29
		first report filed.)	\$	8/5
	TAKEN IN THIS PERIOD			120/00
		dule A) (*also see in-kind below)	_	1376
		e F)ach Schedule H)	_	
(Schedule H	applies to Candidates' Com			1402 99
		SUB-TOTAL	\$	1783 -
SUBTRACT TOTAL N	MONEY SPENT THIS PERIOD	•		20
Schedule B: Expendit	ures total (Attach Schedule B)	(**also see debts and loans below)		1059
		le F)		1
		port balance must be zero)		#424 09
		dule E)		1 0
			7	BUE
		ıle F)	_	
CONSULTANT BREAKDOWN	·		YI	ESNO
CANDIDATE COMMITTEES OF	NLY:			

s Now ?

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) **STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Mus	t be same as	on Statement of Organization)	
^ (^	- -	
Hospant	2-2	SUPERVISOR	

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED	PAC ID NUMBER (if applicable)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE*	AMOUNT RECEIVED	√ IF FOR FUND-
(MM/DD/YR)	AND PAC CHECK NUMBER		(if applicable)		RAISER INCOME
	ID#	vera white,		s	
4-20.08	CK#	1309 w washington winterset Down 50273		10000	
	ID#	PACIL KINNEY 2859 TRURO Rd			
9-20-08	CK#	2859 HRURO Rd TRURO JOWA SOZS7		5000	
	ID#	Shery/ Sonx			
9-20-08	CK#	winterset Town 60273		5000	
	ID#	TERRY 4118K	<u> </u>		
9-20-08	CK#	2968 235M St St Charles Zown 50240		52.00	
	ID#	JERRY AYERS 2531 WINDWOOD AVE			
9-20.08	CK#	54 Charles Down 50240		4000	
	ID#	DANIEL RUNER			
9-20.08	CK#	1776 NRIVER TRAIL WINTERSET DOWN 50273		5000	
	ID#	PESSERY WASNER			
9-20-08	CK#	130 Center St TRURO DOWA 50257		5000	
	ID#	DAIE Thompson			
9-20-08	CK#	WM+885et ZOWA 50273		5000	
	ID#	TOUY LAIRAGE			
9-20.08	CK#	2981 200th This		\$ 000	
	ID#	PASSADY BROS			
9-20-08	CK#	CASSADY BROS 1919 NARREN PROSE JONES SORZ9		10000	
			SUB-TOTAL	-1-00	

TOTAL (if last page of this schedule)

Page / of Z (for Schedule A)

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Mus	t be same as on Statement of Organization)	
HOBBET Sor	Supervisor	

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

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DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	/ IE EOD
RECEIVED	(if applicable)		TO CANDIDATE*	RECEIVED	√ IF FOR FUND-
(MM/DD/YR)	AND PAC CHECK		(if applicable)	1,2021120	RAISER
	NUMBER				INCOME
	ID#	LARRY WILCIN			
	CK#	2911 200th TRI		\$	
7-20-08	CN#			10000	
, , , , ,	ID#	92 IL WARREN		700	
9-20-08		2045 Wildrose AUE			
0 10 0	CK#			\$ 2500	
7.50.00	154	Prole Town 50229		7 25	
	ID#	AIR, KNUTSON			
	CK#	1634 320th st			
9-20-08	5.4.7	LORIMOR DOWN 50149		1000	
	ID#	DE Hobart			
	01411	1991 WILDROSE AUE			
9-20-08	CK#	DA 14 7 57329		27000	
	ID#	Prole town 50229		210	
		TED LENOCKER (PARM Acct) 1428 CHON WOOD AUC			
44	CK#			رجه ا	
10-12-08	154	DEXTER DOWN 50070		15000	
	ID#	128 COHENWOOD AVE		8600	
	CK#	1428 Cottonwood AUS		.00	
10-12-08		Dexter COWA 50070		86-	
	ID#	POLN CONNER			
	CK#	3387 1555 of		_	
10-12-08	UN#	Color no suo toma son 61		5000	
	ID#	CUMMING TOWN 50061 DOUGLAS HOBBET 20063 & PORTHUCREEL Rel		\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	
		2007/AS MONAE!			
10-12-08	CK#	A I I PARTIMOTICE LAC		2000	
10-15-00	ID#	Adel FOWA 50003		20 -	
	ID#				
·	CK#				
	ID#				
	CK#	·			
	Olar I				
* · · · · · · · · · · · · · · · · · · ·			SUB-TOTAL	-6	
			COD-TOTAL	02100	

TOTAL (if last page of this schedule)

\$ 13960

Page 2 of 2 (for Schedule A)

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES			
CHECK THIS BOX IF AMENDING FORM				

COMMITTE	E NAME (Must be	same as on Statement of Organization)		
No	sant lo.	Supervisor		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9-8-68	CK#	JIGNCO 1208 & ZOT et DES MOINES TOWA 50317	Magartic Sigus	\$ 8480
9-22-08	ID# CK#	DESMOINES TRON - SUPPLY DES MOINES TOWA PODEXI382 50 30 5	AUGETRON DOS SIN STAKES	38/6
9-22-08	ID# CK#	Sign max 5921 SZ, 14th st. Suite 1900 DZS moives town 50320	01	29680
9-25-08	ID# CK#	Roya Jishan 311 S.W. WALL Des maires 20WA 50315	Co SSEE POTURD KINS - PAPER Plates - Staples - Stapiler - PAINT - Sor Gurage	4 Fa 60
jü-4-08	ID# CK#	wight & short 924 Ngohnwage Drive Winterset Iowa	Luc (Yo Campaiga)	2500
10-7-08	ID#	MARK It Promotionals 2647 elder Berry AUE Winterset Iam 50273	T-Shirts Por C.B. DARAGE	17769
10-17-08	ID#	ANNE COMER 1105 MONROE CT URBANDA (E ZOWA 50322	Chimpaign posters 281929- Childy - paret - Stencils Der Gued Bridge pares	185 <u>e</u> 9
10-1-08	ID# CK#	the Bakery 119 N John WAYNE DRIVE Winderset Bown	Downs Son Mecks BURY Co She	2869
			SUB-TOTAL	\$ @ 00 23

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page		of	<u>Z</u>
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TOTAL (if last page of this schedule)

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
_	CK THIS BOX IF ENDING FORM

COMMITTEE	MARKE	Advent he	00000 00 00	Statement	of Omanization
COMMITTEE	INVINE	(INIUSI DE	saille as Uli	Statement	of Organization)

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	ID#	the Shopper		
10.17-08	CK#	215 USTAUE 502B PO BOX 28 Uniterset Town	AS S	\$13543
	ID#	winterset madisonian		
10-7-08	CK#	BOX 350 willow set your 50273	40 5	4140
	ID#	1		
16.7-08	CK#	the Exchange 113 5 1 Aug 50273 Pro Box 249 50273 Winter Set 2000A	Ads	3969
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
L	!		SUB-TOT/	AI 8 - E7

SUB-TOTAL

TOTAL (if last page of this schedule)

\$18032

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page ______ of _____